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**FACSIMILE TRANSMISSION**

October 30, 2003

[11301-1480]

**TO**

Rabon Sergent  
Primary Examiner

**FROM**

George Thomas

FAX: 703-872-9310

FAX: 770-951-0933

TEL:

TEL: 770-933-9500

**RE: Serial No.: 09/242,525**

(Message) Please see the attached.

**Number of Pages (Including This Cover Sheet): - - Page(s)**  
**PLEASE ACKNOWLEDGE SAFE AND CLEAR RECEIPT OF ALL PAGES.**

**CONFIDENTIAL**

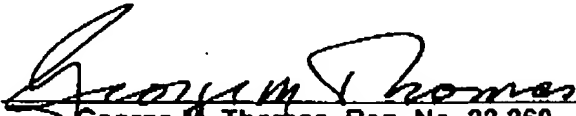
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INTERNATIONAL PATENT, TRADEMARK AND COPYRIGHT LAW AND RELATED LITIGATION

Atlanta, Georgia

Huntsville, Alabama

Received from < > at 10/30/03 10:12:40 AM [Eastern Standard Time]

<b>AMENDMENT TRANSMITTAL LETTER (LARGE)</b>				Docket No. <b>11301-1480</b>	
Applicant(s): <b>Sato, et al.</b>					
Serial No. <b>09/242,525</b>	Filing Date <b>2/17/99</b>	Examiner <b>R. Sergeant</b>	Confirmation No. <b>1170</b>	Group Art Unit <b>1711</b>	
Invention: <b>PROCESS FOR THE PREPARATION OF URETHANE RESINS AND URETHANE RESIN COMPOSITIONS</b>					
<b>Examiner Rabon Sergeant by</b> Facsimile to 703-872-9310 <b>Commissioner for Patents</b>					
Transmitted herewith is Supplemental Response in the above-identified application.					
The fee has been calculated and is transmitted as shown below					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
<b>TOTAL CLAIMS</b>	3 -	45 =	0	X \$18.00	\$0
<b>INDEP. CLAIMS</b>	1 -	20 =	0	X \$86.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$145.00	\$0
<b>EXTENSION FEE</b>	1 <sup>ST</sup> MONTH <input type="checkbox"/> 55.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> 210.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> 475.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> 740.00	\$0
Other Fees:					\$0
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0</b>
<input checked="" type="checkbox"/> No additional fee is required for the Supplemental Response. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed. <input type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____ <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. A duplicate copy of this page is enclosed.					
 George M. Thomas, Reg. No. 22,260			<u>10/30/03</u> Date		

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**PATENT IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of: Sato et al.

Group Art Unit: 1711

Serial No.: 09/242,525

Examiner: Sergeant, R.

Filed: 02/17/99

Docket No.: Docket: 11301-1480

For: PROCESS FOR THE PREPARATION OF URETHANE RESINS AND URETHANE RESIN COMPOSITIONS Confirmation No.: 1170

I hereby certify that this correspondence is being sent by  
facsimile to Examiner Rabon Sergeant at 703-872-9310  
on October 30, 2003.

  
Jo Bryan

**SUPPLEMENTAL AMENDMENT**

Mail Stop Non Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

This is a Supplemental Response to the Response filed on October 14<sup>th</sup>, 2003, which was in response to the nonfinal Office Action of July 30, 2003 (Paper No. 23).

It is not believed that extensions of time or fees for net addition of claims are required, beyond those that may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to Deposit Account No. 20-0778.